SUPPLEMENT

TO THE

BRITISH MEDICAL JOURNAL.

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Meetings of Branches & Divisions.

[*The proceedings of the Divisions and Branches of the Association relating to Scientific and Clinical Medicine, when reported by the Honorary Secretaries, are published in the body of the* JOURNAL.]

BIRMINGHAM BRANCH:
CENTRAL DIVISION.

A GENERAL meeting of this Division was held at the Medical Institute on January 19th, at 3.30 p.m. Dr. W. R. JORDAN (Chairman) presided, and there were twenty-eight other members present.

Confirmation of Minutes.—The minutes of the previous meeting were read, confirmed, and signed.

Apologies for Non-attendance.—Apologies for non-attendance were received from Dr. Branson, and Professors Barling and Morrison.

Scale of Fees for Midwives' Calls.—The HONORARY SECRETARY reported that he had forwarded a copy of the resolution passed by the Division as to the scale of fees payable by the guardians for midwives' calls to the clerk to the guardians, and read a letter in which the clerk informed him that after due consideration the guardians had decided to continue the present scale of fees until the end of next June. It was resolved that the thanks of the Division be conveyed to the guardians for their action.

West Bromwich Education Committee.—With reference to the matter submitted by Dr. Manley at the last meeting, the HONORARY SECRETARY reported that he had sent a copy of the resolution to Dr. Manley, who had reported that the Education Committee at West Bromwich had decided against making a grant to the local hospital for work done for children found defective on medical inspection. It was resolved to thank Dr. Manley for taking this matter up and for bringing it before the Division.

Special Class of Consultants.—The Central Ethical Committee's report on a special class of consultants was then considered. The CHAIRMAN, on behalf of the Executive, moved:

> That this Division expresses the opinion that, while in favour of the recognition of a special class of consultants, it considers any attempt to establish such a class at the present time to be impracticable.

This was seconded by Mr. NUTHALL, and discussed by Drs. DENNE, NEAL, KIRBY, OAKES and STANLEY BARNES, and Messrs. PRIESTLEY SMITH, LEEDHAM-GREEN, and LUCAS. Several amendments were moved, but eventually were withdrawn in favour of one to divide the original resolution into two parts. This was carried and the following resolutions submitted:

1. That this Division is in favour of the recognition of a special class of consultants.
2. That this Division is of opinion that any attempt to establish such a class at the present time is impracticable.

In this form both resolutions were carried, the first by 11 to 4, the second by 14 to 1, in each case several members abstaining from voting.

This concluded the business of this meeting.

CAPE OF GOOD HOPE—EASTERN PROVINCE BRANCH.

A MEETING of this Branch was held at Grahamstown at 8 p.m., on Friday, December 10th, 1909, at the Library of the Association at Rhodes College. Dr. G. E. FITZGERALD was in the chair, and there were present Drs. J. Bruce-Bays, A. Cowper, R. T. Harrison, R. C. Mullins, G. C. Purvis, and E. G. Dru Drury; also, as visitors, Professor J. E. Duerden (Rhodes College), and Wm. Robertson, M.R.C.V.S., and Mr. J. H. L. Lyons (both of the Veterinary Laboratory).

Confirmation of Minutes.—The minutes of the meeting of October 8th, 1909, were read and confirmed.

Branch Library.—Six duplicate keys were laid on the table. It was resolved that a deposit of 2s. 6d. should be paid by each member receiving a key of the Branch Library, the deposit to be returnable in exchange for the surrender of the key. It was resolved that the new shelving for books and specimens erected on the south wall, and the fresh paper on the walls, be approved and paid for as soon as the account is rendered.

Annual Representative Meeting.—The minutes of the Annual Representative Meeting held at Belfast, and the official *précis* of it, were laid on the table.

Proposed South African Committee.—A memorandum of the Organization Committee on the proposed South African Committee was also laid on the table. The Secretary was instructed to prepare a *précis* of the latter document and of the present position of the movement to obtain the committee.

Ethical Cases and Non-Members.—A letter was read on the method of procedure in ethical cases where non-members are involved, and advising secretaries of the risk of libel actions which they may inadvertently incur by writing to third persons about the actions of non-members of the Association.

Presentation to Library.—The SECRETARY presented Volumes I and II of the *British Journal of Children's Diseases* and four binding covers for the remaining volumes to the Library.

Nomination of Officers.—Nominations for the various offices for the year 1910 were then made, and will

appear on the ballot papers before the February meeting. Drs. FitzGerald and Purvis were elected auditors, and Dr. G. F. Lillie was elected Curator of the Museum, and authority was granted to purchase a book for the purpose of a catalogue.

Paper.—Dr. BRUCE-BAYS read a paper entitled Food and its Poisons, which, after dealing with some local experiences, surveyed a very large number of recorded instances of food poisons. All present joined in the discussion; a vote of thanks to Dr. Bruce-Bays was passed, and it was resolved to ask Dr. Darley Hartley to publish.

Storage of Supplies.—It was resolved:

That, in the opinion of this meeting of the Eastern Province Branch of the British Medical Association, it is imperative that the municipal council should adopt regulations to control the preparation, storage, and sale of bread and the storage and sale of meat and milk in Grahamstown.

Meat Inspection.—It was resolved:

That Mr. Lyons be invited to give a practical demonstration on methods of meat inspection at the April meeting of the Branch.

Dinner.—It was resolved:

That the annual meeting in February, 1910, be preceded by a dinner.

GIBRALTAR BRANCH.

A GENERAL meeting of this Branch was held at the Colonial Hospital, Gibraltar, Dr. P. F. LYONS in the chair. There were also present Fleet Surgeon P. Kidd, Staff Surgeons W. H. Daw and B. Hall, Drs. L. H. Gill, J. J. Vasquez, and L. D. Parsons.

Confirmation of Minutes.—The minutes of the last meeting were read and confirmed.

Annual General Meeting and Dinner.—The annual general meeting and dinner were arranged to take place on February 24th.

Paper.—Staff Surgeon DAW read a paper on three cases of somewhat sudden death.

Specimen.—Staff Surgeon HALL showed a portion of a tapeworm with head and hooklets intact.

Case.—Dr. LYONS showed a case of ichthyosis, and gave a short summary of a case of Addison's disease, which members saw afterwards at the patient's house.

Gangrene of the Penis.—Dr. L. D. PARSONS related the following case:

J. P., a cab-driver aged 31, and a native of Gibraltar, was admitted to the Colonial Hospital under his care on August 30th, 1909, when he was acting for the surgeon, who was away from the colony on vacation leave. The patient was suffering from gangrene of the penis. He had been seen by a local practitioner outside, and had complained of fever, but said nothing of the local condition. Finding himself getting no better, he called in another local practitioner, who, noticing a very foul odour in the room, questioned the man, who admitted having something the matter with his penis; when this was seen, there was no doubt of the serious nature of affairs. The man was sent up to hospital, and operated upon without delay. The temperature was over 103° F. on admission. The penis was found to be gangrenous for more than half its length from the suspensory ligament. The scrotum was split in half, the penis removed down to ½ in. of the crura, and the urethra sewn to the edge of the skin in the usual way below and posterior to the scrotum. A few days after the operation the whole of the left side of the abdomen became inflamed, and abscesses formed about 3 in. above the pubic arch and along the left side, between the ribs and the crest of the ilium. Under an anaesthetic these were opened and drained. From the very beginning the patient had large doses of polyvalent serum (20 c.cm.) almost daily. Some very large sloughs separated from the abdominal wall through the incisions made at the second operation, and the portions of the crura left behind also sloughed off, becoming gangrenous. The patient had suffered from syphilis, and had marks of tertiary syphilis on his shins, and he had only recently been married. All the wounds gradually healed up, and when he was handed over on October 19th to the surgeon, after his return from leave, all that remained to heal was a small granulating wound above the pubes. This healed gradually, and the patient was discharged by the surgeon on October 30th quite well.

Foreign Body in Oesophagus.—Dr. L. D. PARSONS reported the following case:

A. B., aged 30, a native of Gibraltar, was admitted to the Colonial Hospital at 5 a.m. on October 8th, 1909, having swallowed a plate with two false teeth. The patient had been indulging in alcohol the previous evening, and had dropped asleep with the plate in his mouth. He wakened up suddenly in the early hours of the morning, and realized to his dismay that he had swallowed his plate of false teeth, and that they had stuck in his throat. The medical officer on duty made several attempts to extract the foreign body, but without success, and the patient was admitted to hospital under the care of Dr. Parsons. When seen about 10 a.m. he was looking nervous and worried, and had the stale smell of alcohol in his breath. There was no difficulty in respiration. A swelling could be seen in the neck about 1 in. above the sterno-clavicular joint on the left side, and just internal to the inner border of the sterno-mastoid muscle. Under chloroform at 1 p.m., an incision was made about 3 in. in length over the swelling and along the anterior margin of the left sterno-mastoid muscle. The trachea was retracted to the right, and the common sheath of the carotid, internal jugular and vagus to the left, and the oesophagus exposed. A curved hook was passed below the oesophagus, and lifted this structure up into the wound. An incision was made over the foreign body after fixing the oesophagus with volsella forceps, the incision being well to the left; two pearly white incisor teeth then appeared. The wound had to be slightly enlarged with blunt-pointed scissors, and the foreign body, after some difficulty, was extracted. It was found that one of the hooks of the plate had fixed itself into the wall of the oesophagus. The plate was of irregular shape, 1½ in. long, curved and with three hooks, two at one end and one at the other. The wound in the oesophagus was closed by a row of interrupted fine catgut sutures and packed with gauze, and two drainage tubes inserted and abundant dressings applied. The patient was put to bed with sandbags on each side of the neck, and the wound frequently dressed, and his mouth washed out often with antiseptics. No food was given by the mouth for eight days, the patient being fed per rectum. He was then given liquids, and at the end of each feed given some diluted brandy to swallow with the idea of keeping the oesophagus aseptic. There was some suppuration and a slight rise of temperature for the first few days, but recovery was uneventful, and he was finally discharged from the hospital on October 25th, 1909, with a soundly healed scar, and as well as he was before his unfortunate accident.

Dr. Parsons added that the patient said he had resolved to be a total abstainer.

Operation for Brain Lesion.—Dr. L. D. PARSONS related the following case:

B. F., aged 57, a native of Gibraltar, and an engine driver, was brought to the hospital in December, 1908. He was nervous and depressed, complained of pain in his head, and had suffered some time from insomnia. His daughter said that for a week he had not slept at all; then he began to talk nonsense and had hallucinations of hearing, and thought people were after him. Dr. Parsons treated him symptomatically, and warned his daughter that he was practically insane and she should get him certified. He continued more or less in this state of mind for three months, being visited at his home by a local practitioner. Finally he became so unmanageable that, on his daughter's application, the police magistrate appointed two medical men to examine him, and he was certified insane on July 17th, 1909, and admitted to the local asylum. There he remained for three weeks, when Dr. Parsons saw him in consultation with Dr. Gill, the acting medical officer. He was quiet, and when his attention was attracted would answer questions. He swayed about from side to side, groaning and moaning, complained of severe pain in his head, and had constant conjugate deviation of his eyes alternately from side to side. With difficulty the fundus was examined, and clearly-marked retinitis pigmentosa was found. There was a scar on the vault of the skull to the right of the middle line, due (he said) to a railway accident seventeen years ago. The conclusion arrived at was that there was some irritative lesion of the brain, most likely at the seat of the scar, and operation was suggested. After the necessary legal authority he was transferred to the Colonial Hospital under the care of Dr. Parsons on August 12th, 1909. The head was carefully shaved and prepared, and on August 14th Dr. Parsons trephined his skull over the vertex to the right of the middle line at its highest part and somewhat to the occipital side of a line drawn from one auditory meatus to the other—in fact, over the situation of the Rolandic fissure. The skull appeared thicker than normal and the bone somewhat adherent to the dura mater, which also appeared thicker than usual. A circular piece of bone, about ¾ in. in diameter, was removed, and the dura mater incised and the pia mater exposed. Some fluid escaped. Nothing further was done beyond stopping haemorrhage and closing down the flap with uninterrupted sutures of silkworm gut. A small gauze drain was inserted. The relief to the clinical symptoms was immediate. The movements of the eye stopped immediately and the patient felt easier and slept well. Unfortunately, owing to the heat and the patient perspiring, the dressings on his scalp acted like an incubator, and a pustular eruption came out all over the scalp outside the immediate operation area. His temperature went up to 105 F., the eruption spread to the neck and back, and the vesicles exuded an irritative fluid, which acted as a blistering fluid, and clinically he looked like a patient suffering from erysipelas. His condition in the first week after operation was very critical. He was treated with large doses of polyvalent serum hypodermically, and an autogenous vaccine was prepared from cultures taken from his pustules, which showed a pure culture of staphylococcus. He gradually improved, but had several attacks of skin trouble with vesication like weeping eczema. This affected his scrotum, back, and legs. The scalp wound healed, despite all this, by first intention, the gauze drain being removed at the

first dressing. The mental condition improved from the very first. He gained weight, became quite cheerful, and finally was discharged from hospital on October 28th, 1909, cured, and the following week resumed his usual duties.

He has since remained well. His name was removed from the lunatic asylum register on September 25th, 1909.

Carbuncle.—Dr. PARSONS reported the following case:

A Frenchman aged 49, acting as an assessor for a marine insurance company, came to Gibraltar in October on business connected with a collision between two steamers. When he left Marseilles early in October, he had a small boil on the back of his neck. This gradually grew worse, and he placed himself in the hands of a local practitioner who treated him for some time, but the local condition becoming worse instead of better he was admitted into hospital under the care of Dr. Parsons on October 28th, 1909. He was a healthy-looking man of good physique. The temperature on admission was normal. On the back of his neck was a large angry vesicular area which looked like a carbuncle, but there was a central necrotic area of purplish-black which looked somewhat like a malignant pustule, and as Dr. Parsons had not yet had the opportunity of seeing anthrax, he asked the opinion of the surgeon of the hospital, who diagnosed it as a case of anthrax. Swabs and glass smears of the pustular discharge were taken and these were examined in the Sanitary Commissioner's laboratory. Cultures showed a pure growth of staphylococcus with no anthrax bacilli. Surrounding the central pustule were a large number of pustules at the roots of the hairs extending for a distance of 4½ to 5 in. from side to side, and from the margin of the hairy scalp to about 1 in. above the spine of the seventh cervical vertebra. This area was painted with liniment of iodine while waiting for the laboratory report, and on the seventh day of his stay in hospital (November 3rd) the whole of this area was excised under chloroform. The temperature, which was normal on admission, rose to 101.6 F. on the 29th, 100.5 on the 30th; it was normal on the morning of the 31st, and 100 F. to 101·2 F. on the three succeeding days, being 101° F. on the day of operation, November 3rd. The portion of skin excised was a mass of sloughing suppurating tissue and extended down to the level of the deep fascia and ligamentum nuchae. The temperature dropped to subnormal the day after the operation, rose to 99 F. the same evening, and was normal on the morning of November 5th. The wound did not look at all healthy. It did not appear that a sufficiently large amount of skin had been removed, and portions of the skin near the hairy scalp were undermined and suppuration was most abundant and very thick. The area outside the wound was much inflamed and angry up to the ears and the patient did not look at all well. His condition seemed so grave that his wife was telegraphed for. Judging from the temperature alone there would have seemed no cause for alarm. He was, however, seen by the French medical officer of a French man-of-war at that time in harbour here, and he agreed that the patient's wife should be summoned. Dr. Parsons then determined to try serum treatment, and injected him with 20 c.cm. of a polyvalent serum prepared by B. W. and Co. The temperature rose that evening to 101 F., and fell again the next morning to normal. He had 10 c.cm. of serum on November 6th, with an evening rise to 99.6 F., which was maintained the following morning, but fell in the evening to 98 F., rising on the morning of the 8th to normal. On that day he was given an injection of half a cubic centimetre of a staphylococcic vaccine equivalent to 50 million dead bacteria; the temperature rose to 99.8 F. the same evening and remained up the following day (9th), dropped to normal on the morning of the 10th, rose again the same evening to 100 F., and was subnormal (97.8 F.) on the morning of the 11th. On that day the vaccine was repeated, and for the three succeeding days the temperature varied from subnormal to 99.5 F. The condition of the wound markedly improved after the second injection, and at that time a dressing of salt solution was substituted for iodine lotion with striking results. The sloughs seemed to come away much more easily, there was less pain, and the patient slept better. He was given a mixture containing citric acid internally. On November 14th the dose of vaccine was doubled, and the reaction was almost *nil*, the temperature rising to 99 F. only in the evening. For the three following days the temperature was subnormal. The local improvement was maintained, and there was now a clean granulating surface. The double dose (1 c.cm.) of vaccine was repeated on the 18th, with no change of temperature, the thermometer registering 98 F. only until the 21st, when it reached normal. The wound was making such excellent progress that no further vaccine injections were given. The dressing with salt solution was continued until the patient left on November 29th. There was then a granulating surface of about 3 in. by 2 in. His wife was shown how to dress him, and he was discharged on November 29th.

A noticeable feature in this case was the marked improvement following the vaccine injections and the salt solution dressings. At one time Dr. Parsons despaired of saving this patient's life, and it was very gratifying to all concerned to see him leave the hospital so well.

Exophthalmic Goitre.—Dr. PARSONS showed a case of exophthalmic goitre.

☞ ***To ensure the insertion of notices in this column, they must be received at the Central Offices of the Association not later than the first post on Tuesday.***

Association Notices.

ANNUAL SUBSCRIPTION, 1910.

MEMBERS are reminded that the Annual Subscription, amounting to 25s., is now due.

Cheques or Postal Orders should be made payable to the British Medical Association, and crossed London County and Westminster Bank.

In the case of Colonial Members the subscription should be paid to the Honorary Treasurer of their respective Branches.

BRANCH AND DIVISION MEETINGS TO BE HELD.

BURMA BRANCH.—The annual meeting of this Branch will be held at the New General Hospital, Rangoon, during the first week in February, commencing on Wednesday, February 2nd, and ending on Saturday, February 5th. Arrangements will be made by the Managing Committee to put up members coming from the districts. *Programme.*—Wednesday, February 2nd, at 9.30 p.m., address by the President, followed by inspection of museum. On Thursday, February 3rd, at 5 p.m., in the Medical Section, a discussion on the "Spread of Tuberculosis in Burma" will be opened by the President. Members intending reading papers on some point in connexion with tuberculosis are asked to communicate with the Honorary Secretary, and limit the length of their papers to ten minutes, informing him the subject of their paper. The Museum will be open from 9 a.m. to 6 p.m. to all medical men, of all grades down to the hospital assistant class, who are cordially invited to visit the Museum. The annual dinner will take place on Friday, February 4th, at 8.15 p.m., Honorary Dinner Secretary, Dr. Pedley. It has been decided to allow each member one visitor's ticket. The cost of the dinner, including wines, which is estimated to come to about Rs. 10 each, will be equally divided amongst members attending the dinner. Attendance at this dinner is optional. Members are requested to intimate their intention of being present at this dinner to Dr. Pedley. During this day it is proposed to arrange visits to places of interest to the Association. On Saturday, February 5th, 5 to 8 p.m., in the Surgical Section, a discussion on "Compound Depressed Fractures of the Skull" will be opened by Major Duer, F.R.C.S. Papers from members on this subject should be limited to ten minutes. Members intending to read a paper on some point in connexion with this subject are asked to communicate with the Honorary Secretary, mentioning the particular point they wish to bring forward, so as to avoid overlapping. Committee of Management: Chairman, Major Barry; Dinner Secretary, Dr. Pedley; General Secretary, Major Rost. Museum: Major Rost (Foods and Drugs), Captain Williams (Instruments), Captain Whitmore (Pathology). It is hoped that members will communicate with the Museum Committee any specimens, photos, microscopic slides, drawings, plans, or anything of interest they have to show, and dispatch these so that they reach Rangoon at least one week before the meeting. A full description must accompany each specimen.—E. R. ROST, Major, I.M.S., General Hospital, Rangoon.

EDINBURGH BRANCH.—The winter clinical meeting of the Edinburgh Branch will be held in the Royal Infirmary, on Friday, February 25th. The other Scottish Branches have as usual been invited to join in the meeting. The museum will be open from 11 a.m. onwards. Arrangements will be made for holding special clinics during the forenoon. The clinical meeting will be held in the Royal Infirmary, at 4 p.m. Dinner in the Royal British Hotel, Princes Street, at 6.30 p.m., morning dress; dinner ticket, 5s. Members who have patients, specimens, etc., for exhibition, are requested to communicate with the Senior Secretary not later than February 16th.—FRANCIS D. BOYD, MICHAEL DEWAR, Honorary Secretaries.

LANCASHIRE AND CHESHIRE BRANCH.—The Branch Council will meet in Manchester on Wednesday, February 16th, at 4.30 p.m.—F. CHARLES LARKIN, Branch Secretary.

LANCASHIRE AND CHESHIRE BRANCH: ALTRINCHAM DIVISION.—A general meeting of the Division will be held at the Brooklands Hotel at 4.30 p.m. (prompt), on Wednesday, February 9th. Further particulars in future notice.—H. G. COOPER, Honorary Secretary.

METROPOLITAN COUNTIES BRANCH: KENSINGTON DIVISION.—Sir Almroth Wright will give a demonstration and address on Vaccine Therapy to the members of the Division at St. Mary's Hospital, Paddington, on Thursday, February 3rd, at 4.30 p.m.

All members of the profession who live in the Division are invited. The Executive Committee wishes to draw attention to an appeal on behalf of the family of the late Dr. J. H. Wells.—H. BECKETT-OVERY, Honorary Secretary, South Kensington, S.W.

SOUTH-MIDLAND BRANCH: BEDFORD AND HERTS DIVISION.—A general meeting of the Bedford and Herts Division will be held at Bedford County Hospital, Bedford, on Thursday, February 10th, at 3 p.m., Dr. J. W. Bone in the chair. Agenda: Minutes. Letters and communications. Manchester Corporation and the Midwives Act. The medical inspection and treatment of school children. Any other business which may arise.—E. H. COBB, Honorary Secretary.

SOUTH-WESTERN BRANCH.—Preliminary notice. An intermediate meeting of the Branch will be held at Exeter on Thursday, February 10th. Members desirous of submitting cases, specimens, etc., or with notices of motion to present, are requested to communicate with the Honorary Secretary not later than February 3rd.—RUSSELL COOMBE, Honorary Secretary.

Naval and Military Appointments.

ROYAL NAVY MEDICAL SERVICE.

WALTER G. EDWARDS, formerly a Surgeon in His Majesty's Fleet, has been re-entered as a Surgeon in His Majesty's Fleet, dated June 9th, 1902.

The following appointments have been made at the Admiralty: Staff Surgeon LLEWELLYN LINDOP, to the *Algerine*, additional, January 17th, and on recommissioning, undated; Surgeon JOHN BOURDAS, to the *Excellent*, January 17th.

ARMY MEDICAL SERVICE.

COLONEL G. T. GOGGIN is placed on retired pay, January 14th. He was appointed Surgeon, March 6th, 1880; Surgeon-Major, March 6th, 1892; granted the rank of Lieutenant-Colonel, March 6th, 1900, and made Colonel, September 6th, 1907. He served in the South African war in 1899-1902, as Senior Medical Officer, Principal Medical Officer of an Infantry Division, and was present at the relief of Ladysmith, at the actions of Colenso, Spion Kop, Vaal Krantz, the Tugela Heights, Pieters Hill, and Laings Nek; he was also in operations in the Transvaal and in the Orange River Colony in which latter he had charge of a general hospital; he was several times mentioned in dispatches, and received the Queen's medal with six clasps and the King's medal with two clasps. He was Principal Medical Officer, Western Command, to which he was appointed October 4th, 1907.

Lieutenant-Colonel ROBERT PORTER, M.B., from the Royal Army Medical Corps, to be Colonel, vice G. T. Goggin, January 14th. Colonel Porter's previous commissions are thus dated: Surgeon, February 5th, 1881; Surgeon-Major, February 5th, 1893; and Lieutenant-Colonel, February 5th, 1901. He was with the Ashanti Expedition in 1895-6, being honourably mentioned and receiving a star; he was also in the South African war in 1899-1902, being present in operations in Natal, including actions at Elandslaagte and Lombard's Kop and the defence of Ladysmith; he was also in operations in the Transvaal, Orange River Colony, and Cape Colony, and has the Queen's medal with five clasps and the King's medal with two clasps.

The undermentioned officers, who are serving in India, are appointed Honorary Surgeons to the Governor-General, from January 1st: Surgeon-General A. T. SLOGGETT, C.M.G., Principal Medical Officer, 6th (Poona) Division; Colonel R. H. FORMAN, M.B., Principal Medical Officer, Bombay Brigade; Lieutenant-Colonel R. S. F. HENDERSON, M.B., Secretary to the Principal Medical Officer, H.M.'s Forces in India.

Surgeon-General F. W. TREVOR, C.B., M.B., Principal Medical Officer in India, is appointed an Honorary Surgeon to the King, vice Surgeon-Major-General C. D. Madden, C.B., deceased, January 6th.

Major C. E. POLLOCK, Royal Army Medical Corps, to be a Deputy Assistant Director-General (attached to the Department of the Director of Military Operations), vice Lieutenant-Colonel W. G. MACPHERSON, C.M.G., M.B., Royal Army Medical Corps, whose tenure of that appointment has expired, dated December 29th, 1909.

ROYAL ARMY MEDICAL CORPS.

Captain J. W. L. SCOTT, who is serving in India, is appointed Specialist in Electrical Science in the 4th (Quetta) Division, from the date of assuming the duties.

Captain F. J. BRAKENRIDGE has received the Royal permission to accept the Imperial Ottoman Order of the Osmanieh, Fourth Class, conferred upon him by the Khedive of Egypt, in recognition of valuable services rendered by him.

The following officers are seconded: Captain JOHN POWELL, M.B., for service with the Egyptian Army, September 22nd, 1909; and Lieutenant STEPHEN FIELD, for service under the Colonial Office, October 1st, 1909.

Lieutenant W. P. MCARTHUR, from the Seconded List, is restored to the establishment, December 1st, 1909. He was appointed on probation, January 30th, 1909.

Lieutenant-Colonel F. J. JENCKEN, M.B., has been appointed Officer in Charge, Royal Victoria Hospital, Netley, vice Colonel T. P. Woodhouse.

Major C. B. MARTIN, M.B., has been appointed Registrar and Secretary, Royal Victoria Hospital, Netley, vice Major O. L. Robinson.

Major R. C. THACKER retires on retired pay, January 26th. He was appointed Surgeon-Captain, February 5th, 1887; and became Major, February 5th, 1899. He was with the Tirah Expeditionary Force on the North-West Frontier of India in 1897-8, receiving a medal with two clasps; and in the South African war in 1899-1902, being present in operations in Orange River Colony and Cape Colony, for which he received the Queen's medal with two clasps and the King's medal with two clasps.

INDIAN MEDICAL SERVICE.

THE retirement from the service of Surgeon-General Sir G. BOMFORD, K.C.I.E., M.D., Director-General, which was announced some time ago in the BRITISH MEDICAL JOURNAL, is gazetted, to date from January 1st.

Lieutenant V. B. GREEN-ARMYTAGE is appointed Specialist in Midwifery and the Diseases of Women and Children, Burmah Division, from September 18th, 1909.

SPECIAL RESERVE OF OFFICERS.

ROYAL ARMY MEDICAL CORPS.

Correction.—In the Supplementary List under this heading, in the SUPPLEMENT of January 15th, p. 23, the name printed as DONALD MACKINNON should have been RONALD MACKINNON, M.B.

TERRITORIAL FORCE.

INFANTRY.

Fifth Battalion the South Staffordshire Regiment.—Surgeon-Major J. S. WILSON, M.D., from the 2nd Volunteer Battalion the South Staffordshire Regiment, to be Surgeon-Major, with precedence as in the Volunteer Force, dated April 1st, 1908. He is promoted to be Surgeon-Lieutenant-Colonel, May 7th, 1908.

Sixth Battalion the Sherwood Foresters (Nottinghamshire and Derbyshire Regiment).—Surgeon-Lieutenant A. W. SHEA to be Surgeon-Captain, April 1st, 1908.

ROYAL ARMY MEDICAL CORPS.

Sixth Battalion South Staffordshire Regiment.—Major VINCENT J. MAGRANE is granted the honorary rank of Lieutenant-Colonel. Major and Honorary Lieutenant-Colonel Vincent J. Magrane resigns his commission, and is granted permission to retain his rank and to wear the prescribed uniform. Served in South Africa, 1902, in command of Volunteer Company South Staffordshire Regiment (Queen's medal, two clasps). V.D., 1907.

Third North Midland Field Ambulance.—CHARLES A. STIDSTON, M.D., to be Lieutenant, December 7th, 1909.

Sanitary Service.—CHARLES M. FEGEN to be Captain, whose services will be available on mobilization, January 7th.

Attached to Units other than Medical Units.—The transfer from the 2nd Volunteer Battalion the South Staffordshire Regiment of Surgeon-Major J. S. WILSON, M.D., which was announced in the *London Gazette* of November 6th, 1908, is cancelled. He is promoted to be Lieutenant-Colonel, dated May 8th, 1908. He resigns his commission, retaining his rank and uniform, dated October 31st, 1909.

For Attachment to Units other than Medical Units.—GEORGE D. COLLEN, M.D., to be Lieutenant, December 16th, 1909.

CHANGES OF STATIONS.

THE following changes of stations amongst the officers of the Army Medical Service have been officially reported to have taken place during December, 1909:

	FROM	TO
Surgeon-General O. E. P. Lloyd, V.C.	Meerut ...	South Africa.
Colonel T. M. Corker, M.D.	Edinburgh	Egypt.
,, F. B. Maclean	Lucknow	Meerut.
,, M. W. Kerin	Bareilly	Lucknow.
,, T. P. Woodhouse	Netley ...	Edinburgh.
Lieut.-Col. C. E. Nichol, D.S.O., M.B.	Aldershot	India.
,, J. M. Reid, M.D.	Hong Kong	London.
,, T. B. Winter	Bareilly	Chakrata.
,, C. Birt	Malta	R.A.M. Coll.
,, R. S. F. Henderson, M.B.	Simla	Calcutta.
,, J. Meek, M.D.	Poona	Simla.
,, C. T. Blackwell, M.D.	—	Woolwich.
,, M. T. Yarr, F.R.C.S.I.	Dublin	Edinburgh.
,, H. M. Adamson, M.B.	Irish Com'd.	York.
,, J. V. Salvage, M.D.	London	India.
,, F. S. Le Quesne, V.C.	Dinapore	E. Command.
,, R. H. Penton, D.S.O.	York	India.
Major J. Ritchie, M.B.	Woolwich	,,
,, M. P. C. Holt, D.S.O.	Kasauli	Ambala.
,, H. I. Pocock	Kailana	Shahjehanpur.
,, R. C. Thacker	—	Cork District.
,, E. M. Hassard	Shorncliffe	India.
,, J. Girvin	Colaba	Deolali.
,, H. E. Winter	,,	E. Command.
,, F. Smith, D.S.O.	Murree	Rawal Pindi.
,, E. E. Powell	Aldershot	Bordon.
,, J. W. Jennings, D.S.O.	Mandalay	W. Command.
,, C. W. H. Whitestone, M.B.	Cherat	Peshawar.
,, G. W. Tate, M.B.	Dundalk	Dublin.
,, S. H. Withers, M.B.	Gharial	Ambala.
,, L. P. More, M.B.	Murree	Rawal Pindi.
,, R. F. E. Austin	Chatham	India.
,, C. E. Pollock	—	War Office.
,, C. M. Fleury	Warwick	Tidworth.
,, E. S. Clark, M.B.	—	Belfast Dist.
,, K. M. Cameron, M.B.	Simla	Calcutta.
,, M. Boyle, M.B.	—	Leeds.
,, F. Kiddle, M.B.	Wellington	Roy. Hospital, Chelsea.
,, L. F. Smith, M.B.	Woolwich Arsenal	India.
,, St. J. B. Killery	Shahjehanpur	Bareilly.
,, H. Hewetson	—	Mill Hill.
,, W. E. Hudleston	Mhow	S. Command.
,, S. L. Cummins, M.B.	Netley	London.
,, H. V. Dillon, retired pay	Trowbridge	Scarborough.
Captain P. H. Collingwood	Hong Kong	S. Command.
,, A. E. Thorp	Weymouth	Cosham.
,, H. Herrick	Hyderabad	Karachi.
,, E. P. Hewitt	Norwich	India.
,, H. D. Packer	Devonport	Crown Hill.
,, R. A. Cunningham, M.B.	Netley	Agra.
,, H. E. M. Douglas, V.C., D.S.O.	Egypt	R.A.M. Coll.
,, H. S. Anderson	Cork	Fermoy.
,, R. L. Argles	Multan	Ferozepore.
,, E. G. Ford, M.B.	Bradford	India.
,, J. G. Churton	Aldershot	,,
,, C. H. Carr, M.D.	Oxford	Tidworth.
,, R. T. Brown, M.D.	Colchester	India.
,, G. Baillie, M.B.	Tidworth	Bulford.
,, R. L. Popham	Curragh	Dublin.
,, S. B. Smith, M.D.	Kilbride	Dublin.
,, E. E. Parkes, M.B.	Netley	Plymouth.
,, W. F. Ellis	Dalhousie	Lahore.
,, J. W. S. Seccombe	Bangalore	Jullundur.
,, F. C. Lambert	Capetown	S. Command.

		FROM	TO
Captain	B. H. V. Dunbar, M.D.	Leeds	Richmond. Yorks.
,,	B. G. Patch	—	Enniskillen.
,,	S. L. Pallant	—	Chatham.
,,	C. R. Sylvester-Bradley	—	Warley.
,,	S. E. Lewis, M.B.	Simon's Town	E. Command.
,,	W. MacD. MacDowall	—	Cork District.
,,	W. Wiley, M.B.	Bangalore	S. Command.
,,	K. A. C. Doig	Muttra	Bareilly.
,,	L. V. Thurston	Jubbulpore	Jullundur.
,,	H. H. A. Emerson, M.B.	Bermuda	E. Command.
,,	T. Scatchard	Agra	Dehra Dun.
,,	C. J. Wyatt, M.B.	Straits Settlements	Scottish Command.
,,	A. D. O'Carroll, M.B.	Dagshai	Ambala.
,,	C. R. M. Morris, M.B.	Sialkot	Dehra Dun.
,,	R. E. U. Newman, M.B.	Kalabagh	Cp. Haveliyan.
Lieutenant	W. Mitchell, M.B.	Sabathu	Ambala.
,,	C. H. Denyer	Calcutta	Jubbulpore.
,,	O. R. McEwen	Khyra-Gali	Multan.
,,	T. H. Scott, M.B.	Dalhousie	Lahore.
,,	G. F. Dawson, M.B.	Colchester	India.
,,	H. V. B. Byatt	Bulford	,,
,,	R. E. Todd, M.B.	Pembroke D'k.	Egypt.
,,	H. Gibson	Portsmouth	Cosham.
,,	J. A. Renshaw	Dover	Rawal Pindi.
,,	R. De V. King	Ewshot	,,
,,	H. W. Carson, M.B.	Manchester	,,
,,	F. T. Dowling, M.B.	Wedgenock Cp	,,
,,	R. F. O'T. Dickinson	Poona	Jubbulpore.
,,	A. Hendry, M.B.	,,	Mhow
,,	J. R. Lloyd	,,	Jubbulpore.
,,	F. M. Hewson	Newbridge	Curragh.
,,	C. Clarke, M.B.	Shorncliffe	Dover.
,,	A. R. Wright, M.B.	—	Bordon.
,,	T. B. Nicholls, M.B.	Cosham	Hilsea.
,,	F. H. Somers-Gardner, M.B.	Reading	Bordon.
,,	C. H. O'Rorke, M.B.	Curragh	Kildare.
,,	H. F. Joynt, M.B.	Woolwich	Hounslow.
,,	A. S. M. Winder, M.B.	Dublin	Curragh.
,,	P. G. M. Elvery	,,	,,

ROYAL HOSPITAL, CHELSEA.

LIEUTENANT-COLONEL R. J. C. COTTELL, Royal Army Medical Corps, from Deputy Surgeon, to be Physician and Surgeon, vice Colonel C. Seymour, M.B., whose period of appointment has expired, January 1st.

Major FREDERICK KIDDLE, M.B., Royal Army Medical Corps, to be Deputy Surgeon, vice Lieutenant-Colonel R. J. C. Cottell, January 1st. Major Kiddle is seconded whilst holding this appointment.

COLONIAL MEDICAL SERVICE.

THE following have been appointed to the Staff: J. R. P. ALLIN, L.R.C.P., L.R.C.S., L.M.Irel., Southern Nigeria; T. HOOD RANKIN, M.B., Ch.B.Glasg., Southern Nigeria; C. W. O'KEEFFE, L.R.C.S., L.R.C.P.Irel., L.A.H.Dubl., Southern Nigeria; G. M. GRAY, M.D.Glas., Southern Nigeria; J. W. ARCHIBALD, M.B., Ch.B.Aberd., Southern Nigeria.

Other Colonies.

Mr. R. P. COCKIN, M.B., B.C.Cantab., lately an officer of the West African Medical Staff, has been appointed a District Medical Officer in Cyprus. Mr. P. HARPER, M.R.C.S.Eng., L.R.C.P.Lond., has been selected for appointment as Medical Officer in Fiji. Mr. R. COX, M.B., B.S., R.U.I., has been selected for appointment as House-Surgeon in the Medical Department of the Federated Malay States.

Retirements.

T. E. FRAZER TOOVEY, F.R.C.S., L.R.C.P.Edin., L.F.P.S.Glasg., L.M.Rotunda, Medical Officer, Southern Nigeria, retires with gratuity from August 9th, 1909. R. P. COCKIN, M.B., B.C.Camb., Medical Officer, Southern Nigeria, retires from August 31st, 1909. W. R. LAMBALESTIER, M.R.C.S.Eng., L.R.C.P.Lond., L.D.S., Medical Officer, Southern Nigeria, resigns from October 5th, 1909. A. E. OAKELEY, M.R.C.S.Eng., L.R.C.P.Lond., Medical Officer, Northern Nigeria, resigns from October 20th, 1909.

Transfer.

C. C. ROBINSON, M.B.Lond., M.R.C.S.Eng., L.R.C.P.Lond., Medical Officer, Southern Nigeria, transferred to Straits Settlements from September 24th, 1909.

Promotions.

T. E. RICE, L.S.A., Senior Medical Officer, Gold Coast, to be Senior Sanitary Officer, Gold Coast. G. C. WALKER, M.B., Ch.B.Victoria, M.R.C.S.Eng., L.R.C.P.Lond., D.P.H.Lond., Medical Officer, Gold Coast, to be Sanitary Officer, Gold Coast.

Reappointment.

H. W. GUSH, M.B., Ch.B.Edin., late Medical Officer, Gold Coast, to be Medical Officer, Northern Nigeria, from January 5th, 1910.

Vital Statistics.

HEALTH OF ENGLISH TOWNS.

IN seventy-six of the largest English towns, including London, 7,554 births and 4,749 deaths were registered during the week ending Saturday last, January 22nd. The annual rate of mortality in these towns, which had been 14.8 and 14.9 per 1,000 in the two preceding weeks, declined again to 14.8 per 1,000 last week. The rates in the several towns ranged from 6.8 in King's Norton, 8.5 in Hornsey and in Newport (Mon.), 8.8 in Willesden, 8.9 in York, 9.1 in Hastings, and 9.7 in Aston Manor, to 19.1 in Sunderland, 19.7 in Hull and in Merthyr Tydfil, 21.3 in Ipswich, 22.8 in Bury, 22.9 in Barrow-in-Furness and in Rhondda, and 23.7 in Swansea. In London the rate of mortality was 14.5 per 1,000, while it averaged 14.9 in the seventy-five other large towns. The death-rate from the principal infectious diseases averaged 0.9 per 1,000 in the seventy-six towns; in London these diseases caused a death-rate of 0.8 per 1,000, while among the seventy-five other large towns the rates ranged upwards to 2.2 in Hanley, 2.9 in West Bromwich, 3.2 in Swansea, 3.3 in Barrow-in-Furness, and 4.1 in Ipswich. Measles caused a death-rate of 1.3 in Birkenhead, 1.5 in West Bromwich, 1.6 in Northampton, 2.1 in Swansea, and 3.4 in Ipswich; scarlet fever of 1.2 in Aston Manor; diphtheria of 1.5 in Hanley and 2.5 in Barrow-in-Furness; whooping-cough of 1.1 in Hull, 1.5 in Walthamstow, in Hastings, and in Bootle, and 1.9 in West Hartlepool; and "fever" of 1.2 in Devonport. The mortality from diarrhoea showed no marked excess in any of the large towns, and no fatal case of small-pox was registered during the week. The Metropolitan Asylums Hospitals contained 3 small-pox patients at the end of last week, against 5 and 4 at the end of the two preceding weeks. The number of scarlet fever cases under treatment in these hospitals and in the London Fever Hospital, which had been 2,362, 2,256, and 2,172 at the end of the three preceding weeks, had further declined to 2,069 on Saturday last; 204 new cases were admitted during the week, against 244, 212, and 200 in the three preceding weeks.

HEALTH OF SCOTTISH TOWNS.

DURING the week ending Saturday last, January 22nd, 829 births and 563 deaths were registered in eight of the principal Scottish towns. The annual rate of mortality in these towns, which had been 20.4 and 16.7 per 1,000 in the two preceding weeks, further declined last week to 15.5 per 1,000, but was 0.7 per 1,000 above the mean rate during the same period in the seventy-six large English towns. Among these Scottish towns the death-rates ranged from 11.2 in Aberdeen and 11.4 in Leith, to 17.7 in Greenock and 20.8 in Dundee. The death-rate from the principal infectious diseases averaged 2.1 per 1,000 in the eight towns, the highest rates being recorded in Glasgow and Greenock. The 263 deaths registered in Glasgow included 39 which were referred to measles, 2 to scarlet fever, 4 to diphtheria, 3 to enteric fever, and 5 to diarrhoea. Six fatal cases of measles and 4 of diarrhoea were recorded in Edinburgh; 2 of diphtheria and 3 of diarrhoea in Dundee; 2 of diphtheria in Aberdeen; and 2 of whooping-cough in Greenock.

HEALTH OF IRISH TOWNS.

DURING the week ending Saturday, January 22nd, 545 births and 422 deaths were registered in the twenty-two principal urban districts of Ireland, as against 595 births and 492 deaths in the preceding period. The annual death-rate in these districts, which had been 25.4, 19.7, and 22.3 per 1,000 in the three preceding weeks, fell to 19.1 per 1,000 in the week under notice, this figure being 4.3 per 1,000 higher than the mean annual death-rate in the seventy-six English towns for the corresponding period. The figures in Dublin and Belfast were 22.5 and 16.7 respectively, those in other districts ranging from 4.8 in Sligo and 4.9 in Kilkenny to 33.5 in Ballymena and 37.8 in Newry, while Cork stood at 15.1, Londonderry at 14.4, Limerick at 20.5, and Waterford at 17.5. The zymotic death-rate in the twenty-two districts averaged 1.3, or the same as in the preceding period.

ENGLISH URBAN MORTALITY IN THE FOURTH QUARTER OF 1909.

[SPECIALLY REPORTED FOR THE BRITISH MEDICAL JOURNAL.]

IN the accompanying table will be found summarized the vital statistics of seventy-six of the largest English towns, based upon the Registrar-General's weekly returns for the fourth quarter of last year. The 100,041 births registered in these towns during the quarter under notice were equal to an annual rate of 24.4 per 1,000 of the population, estimated at 16,445,281 persons in the middle of last year; in the corresponding quarters of the three preceding years the birth-rates were 26.5, 25.5, and 25.0 per 1,000 respectively. In London the birth-rate last quarter was equal to 23.4 per 1,000, while it averaged 24.9 in the seventy-five other large towns, and ranged from 13.5 in Hornsey, 15.0 in Bournemouth, 15.4 in Hastings, 15.9 in Halifax, 18.0 in Bradford, and 18.1 in Handsworth (Staffs), to 31.1 in Rotherham, 31.2 in Hanley, 31.8 in Swansea, 32.6 in Tynemouth, 36.7 in Merthyr Tydfil, and 41.6 in Rhondda.

The 58,573 deaths registered in these towns last quarter were equal to an annual rate of 14.3 per 1,000, the death rate in the fourth quarter of the three preceding years having been 16.2, 15.4, and 14.8 per 1,000 respectively. The death-rate in London last quarter was equal to 13.5 per 1,000, while it averaged 14.6 per 1,000 in the seventy-five other large towns, and ranged from 8.8 in Handsworth (Staffs), 9.2 in Hornsey, in East Ham, and in King's Norton, 9.5 in Croydon, and 9.6 in Leyton, to 18.2 in Wigan, 18.6 in Liverpool, 18.9 in Middlesbrough, 19.6 in Oldham, 19.9 in Merthyr Tydfil, 21.2 in Swansea, and 22.4 in Hanley.

The 58,573 deaths from all causes included 3,838 which were referred to the principal infectious diseases; of these, 4 resulted from small-pox, 569 from measles, 449 from scarlet fever, 600 from diphtheria, 749 from whooping-cough, 271 from "fever" (principally enteric), and 1,196 from diarrhoea. These 3,838 deaths were equal to an annual rate of 0.94 per 1,000, the death-rates from the same diseases in the corresponding periods of the three preceding years having been 1.72, 1.68, and 1.49 per 1,000. The rate of mortality in London last quarter from these principal infectious diseases was 0.77 per 1,000; in the seventy-five other large towns the rate averaged 1.01 per 1,000, and ranged from 0.25 in Croydon, 0.29 in Bournemouth, 0.33 in York, 0.36 in Hastings, 0.39 in Brighton, 0.46 in Tottenham, and 0.48 in Reading, to 1.83 in Ipswich, 1.99 in West Bromwich, 2.05 in Birkenhead, 2.07 in Rhondda, 2.16 in Swansea, 2.21 in Merthyr Tydfil, and 4.61 in Hanley.

The 569 deaths from measles were equal to an annual rate of 0.14 per 1,000; in London the death-rate from this disease was 0.11 per 1,000, while among the seventy-five other large towns it ranged upwards to 0.51 in West Bromwich, 0.64 in Burnley, 0.70 in Ipswich, 0.82 in Swansea, 1.07 in Northampton, 1.09 in Birkenhead, and 2.27 in Hanley. The 449 fatal cases of scarlet fever corresponded to a rate of 0.11 per 1,000; in London the scarlet fever death-rate was only 0.07 per 1,000, but among the other towns it ranged upwards to 0.26 in Birmingham and in Merthyr Tydfil, 0.27 in Salford, 0.28 in Bolton, 0.31 in Wigan and in Rochdale, 0.38 in Blackburn, and 0.40 in Coventry. The 600 deaths from diphtheria were equal to an annual rate of 0.15 per 1,000; the rate in London was 0.11, but ranged upwards in the other towns to 0.35 in Sunderland, 0.36 in Hull, 0.37 in Burton-on-Trent, 0.43 in Halifax, 0.45 in Barrow-in-Furness, 0.51 in Salford, and 0.82 in Hanley. The 749 fatal cases of whooping-cough corresponded to a rate of 0.18 per 1,000; in London the death-rate from this disease was 0.20 per 1,000, while the highest rates in the seventy-five other large towns were 0.41 in Walthamstow, 0.44 in Leicester, 0.51 in Merthyr Tydfil, 0.53 in Sunderland, 0.65 in Swansea, and 0.70 in Ipswich. The 271 deaths referred to "fever" were equal to an annual rate of 0.07 per 1,000; in London the "fever" death-rate was only 0.03 per 1,000, but among the other large towns it ranged upwards to 0.27 in Grimsby, 0.28 in West Bromwich, 0.29 in Hanley, 0.30 in Portsmouth and in Bolton, and 0.31 in Wigan. The 1,196 fatal cases of diarrhoea corresponded to a rate of 0.29 per 1,000, which was 0.04 per 1,000 more than the mortality in London from the same cause; among the seventy-five other large towns the highest death-rates from diarrhoea were 0.72 in South

Analysis of the Vital Statistics of Seventy-six of the Largest English Towns during the Fourth Quarter of 1909.

Towns.	Estimated Population middle of 1909.	Births.	Deaths.	Annual rate per 1,000 Living. Births.	Deaths.	Principal Infectious Diseases.	Deaths from Principal Infectious Diseases.	Small-pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping-cough.	Fever	Diarrhœa.	Deaths of Children under one year of age to 1,000 Births.	Rate per cent. of Uncertified Deaths.
76 Towns	16,445,281	100,011	58,573	24.4	14.3	0.94	3.838	4	569	449	600	749	271	1,196	128	0.8
75 Provincial Towns	11,611,343	71,981	42,302	24.9	14 6	1.01	2,905	3	433	363	469	510	235	892	133	1.1
London	4,833,938	28,150	16,271	23.4	13.5	0.77	933	1	136	86	131	239	36	304	116	0.1
Croydon	161,078	909	380	22.6	9.5	0.25	11	—	—	3	3	1	1	3	64	—
Willesden	160,424	1,007	401	25.2	10.0	0.63	25	—	4	4	4	2	—	11	89	0.5
Hornsey	95,628	323	219	13.5	9.2	0.80	19	—	10	1	5	—	—	3	74	—
Tottenham	129,464	934	394	28.9	12.2	0.46	15	—	1	—	6	5	—	3	107	—
West Ham	321,767	2,095	1,049	26.1	13 1	1.16	93	—	11	13	11	25	6	27	116	0.3
East Ham	149,575	848	344	22.7	9.2	0.67	25	—	—	5	4	9	3	4	104	—
Leyton	129,614	750	309	23.2	9 6	0.56	18	—	—	—	8	7	1	2	71	—
Walthamstow	136,602	777	340	22.8	10.0	0.89	30	—	2	4	4	14	1	5	107	0.3
Hastings	68,165	261	196	15.4	11.5	0.36	6	—	—	—	1	3	—	2	80	1.0
Brighton	130,926	645	502	19.8	15.4	0.39	13	—	—	1	2	3	2	5	121	0.2
Portsmouth	214,726	1,454	713	27.2	13 3	1.07	57	—	1	9	15	2	16	14	91	0.4
Bournemouth	72,368	270	214	15.0	11.9	0.29	5	—	1	—	2	1	—	1	100	—
Southampton	124,667	710	404	22.8	13.0	0.55	17	—	—	1	3	4	2	7	87	—
Reading	82,995	420	216	20.3	10.4	0.48	10	—	2	—	3	—	—	5	88	2.8
Northampton	97,752	501	332	20.6	13.6	1.43	35	—	26	—	4	—	1	4	138	0.6
Ipswich	74,889	422	287	22.6	15.4	1.83	34	—	13	—	3	13	2	3	118	—
Great Yarmouth	53,430	343	220	25.7	16.5	1.04	14	—	—	—	1	3	—	10	120	—
Norwich	124,136	708	391	22.9	12.6	0.56	17	—	—	4	3	—	3	7	99	1.0
Plymouth	124,180	691	444	22.3	14.3	0.90	28	—	—	2	5	12	2	7	117	—
Devonport	83,103	554	244	26.7	11.8	0.77	16	—	—	1	5	1	—	9	108	—
Bristol	377,642	2,043	1,169	21.7	12.4	0.73	69	—	28	2	15	4	4	16	101	0.1
Hanley	68,831	535	385	31.2	22.4	4.61	79	—	39	2	14	5	5	14	202	1.0
Burton-on-Trent	54,453	270	174	19.9	12.8	0.51	7	—	—	—	5	1	—	1	107	1.7
Wolverhampton	104,633	584	362	22.4	13.9	0.73	19	—	8	2	1	2	3	3	144	0.3
Walsall	99,399	669	369	27.1	14 9	1.29	32	—	2	5	1	3	—	21	161	0.8
Handsworth	70,186	316	154	18.1	8.8	0 63	11	—	—	1	2	4	—	4	98	1.3
West Bromwich	70,457	519	282	29.5	16 1	1 99	35	—	9	3	3	4	5	11	162	2.5
Birmingham	563,629	3,447	1,995	24.5	14.2	1.04	146	—	3	37	19	32	10	45	135	3.2
King's Norton	81,632	446	188	21.9	9.2	0.69	14	—	—	3	7	2	—	2	81	1.6
Smethwick	70,377	483	214	27.5	12.2	1.19	21	—	—	2	4	6	3	6	126	0.5
Aston Manor	85,257	460	262	21.6	12.3	0.66	14	—	—	1	1	6	—	6	141	0.4
Coventry	80,163	606	312	30.3	15.6	1.45	29	—	7	8	2	5	1	6	109	2.9
Leicester	244,255	1,282	840	21.1	13.8	0.69	42	—	—	1	3	27	1	10	137	0.4
Grimsby	73,036	548	260	30.1	14.3	0 82	15	—	—	—	2	2	5	6	137	1.2
Nottingham	263,443	1,579	1.034	24.0	15.7	0.85	56	—	4	5	13	6	8	20	135	0 4
Derby	129,411	724	443	22.4	13.7	0.68	22	—	3	2	2	9	—	6	142	—
Stockport	103,706	656	431	25.4	16 7	0 80	21	—	4	—	5	—	—	12	165	0.2
Birkenhead	121,123	862	533	28.5	17.7	2.05	62	—	33	4	5	11	3	6	152	0.4
Wallasey	71,004	412	241	23.3	13.6	0.91	16	—	8	3	1	—	—	4	102	0.8
Liverpool	760,357	5,483	3,531	28.9	18.6	1.36	257	—	22	41	28	57	19	90	156	2.4
Bootle	69,393	527	291	30.5	16.8	0.76	13	—	2	4	2	3	—	2	135	5.8
St. Helens	95,161	703	404	29.6	17.0	1.39	33	—	—	6	3	9	6	9	188	3.7
Wigan	90,678	647	412	28.6	18.2	1.42	32	—	—	7	4	4	7	10	199	0.2
Warrington	72,276	554	269	30.7	14.9	0.61	11	—	—	2	6	—	2	1	116	4.5
Bolton	187,824	1,047	714	22.4	15.2	0.96	45	—	2	13	2	4	14	10	152	0.3
Bury	59,234	284	217	19.2	14 7	0.55	8	—	—	2	1	1	—	4	141	1.8
Manchester	655,435	4,224	2,807	25.8	17.2	0.98	160	—	33	39	24	9	12	43	147	0.8
Salford	241,950	1,548	1,062	25.7	17.6	1.76	106	—	14	16	31	8	7	30	161	0.5
Oldham	143,301	853	702	23.9	19.6	0.83	29	—	—	1	2	7	2	17	189	0.1
Rochdale	89,653	504	348	22.5	15 6	0.56	13	—	1	7	1	3	1	—	103	2.9
Burnley	106,267	610	470	23.0	17.7	1.78	47	—	17	5	4	2	2	17	187	0.9
Blackburn	136,959	684	560	20.0	16.4	1.36	46	—	—	13	7	2	7	17	148	1.4
Preston	118,519	699	466	23.7	15.8	1.23	36	—	4	2	4	6	4	16	155	2.8
Barrow-in-Furness	62,996	390	218	24.8	13.9	1.47	23	—	—	3	7	6	2	5	123	3.2
Huddersfield	94,739	534	406	22.6	17.2	0.88	21	—	—	4	5	2	2	8	99	0.5
Halifax	111,911	445	420	15.9	15 1	1.03	29	—	—	4	12	9	—	4	139	1.9
Bradford	293,983	1,321	1,023	18.0	14.0	0.61	45	—	5	11	11	4	4	10	136	0.3
Leeds	484,012	2,511	1,648	20.8	13 7	0.71	85	—	19	3	12	14	13	24	119	0.2
Sheffield	470,958	3,069	1,493	26.1	12.7	0.61	71	—	5	13	10	6	7	30	110	1.5
Rotherham	65,070	504	230	31.1	14.2	0.99	16	—	1	—	1	—	4	10	131	1.3
York	87,004	513	247	23.7	11.4	0.33	7	—	3	—	1	2	1	—	94	—
Hull	275,552	1,899	1,072	27.6	15.6	1.43	99	2	6	3	25	18	5	40	140	0.7
Middlesbrough	105,255	783	496	29.8	18.9	1.34	35	—	2	—	6	7	4	16	172	1.4
Stockton-on-Tees	53,417	337	172	25.3	12.9	0.53	7	—	1	—	—	2	—	4	119	1.2
West Hartlepool	79,686	465	205	23.4	10 3	0.75	15	—	3	2	2	5	2	1	110	1.0
Sunderland	159,378	1,092	694	27.5	17.5	1.56	62	—	2	4	14	21	4	17	179	2.9
South Shields	117,627	810	454	27.6	15.5	1.39	41	—	1	5	6	6	2	21	175	4.4
Gateshead	131,024	891	450	27.3	13 8	1.15	38	—	1	1	7	8	—	21	174	4.7
Newcastle-on-Tyne	281,584	1,793	1,012	25.5	14 4	0.80	55	—	11	6	11	14	4	9	139	0.1
Tynemouth	55,808	453	213	32.6	15.3	0.79	11	—	1	3	2	—	—	5	124	2.3
Newport (Mon.)	78,336	567	292	29.0	15.0	0.96	19	—	9	1	2	1	3	3	146	—
Cardiff	195,303	1,178	615	24.2	12.6	0.52	26	—	7	1	3	5	1	9	113	—
Rhondda	135,894	1,410	534	41.6	15.8	2.07	70	—	14	6	9	5	3	33	125	—
Merthyr Tydfil	78,365	717	388	36.7	19.9	2.21	43	—	8	5	5	10	1	14	187	1.0
Swansea	98,308	779	520	31.8	21.2	2.16	53	1	20	1	2	16	2	11	187	1.0

Shields and in Merthyr Tydfil, 0.75 in Great Yarmouth, 0.82 in Hanley, 0.85 in Walsall, and 0.97 in Rhondda. Of the 4 deaths from small-pox 2 belonged to Hull, 1 to London, and 1 to Swansea.

Infant mortality, measured by the proportion of deaths among children under 1 year of age to registered births, was equal to 128 per 1,000 last quarter, against 138, 154, and 146 in the corresponding quarters of the three preceding years. In London the rate of infant mortality in the quarter under notice was 116 per 1,000, while it averaged 133 in the seventy-five other large towns, and ranged from 64 in Croydon, 71 in Leyton, 74 in Hornsey, 80 in Hastings, 81 in King's Norton, 87 in Southampton, 88 in Reading, and 89 in Willesden, to 187 in Burnley, in Merthyr Tydfil, and in Swansea, 188 in in St. Helens, 189 in Oldham, 199 in Wigan, and 202 in Hanley.

The causes of 497, or 0.8 per cent., of the deaths registered in the seventy-six large towns last quarter were not certified either by a registered medical practitioner or by a coroner. All the causes of death were duly certified in Croydon, Hornsey, Tottenham, East Ham, Leyton, Bournemouth, Southampton, Ipswich, Great Yarmouth, Plymouth, Devonport, Derby, York, Newport, Cardiff, and Rhondda; among the other towns the proportion per cent. of uncertified deaths ranged upwards to 3.2 in Birmingham and in Barrow-in-Furness, 3.7 in St. Helens, 4 4 in South Shields, 4.5 in Warrington, 4.7 in Gateshead, and 5.8 in Bootle.

Vacancies and Appointments.

This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column, advertisements must be received not later than the first post on Wednesday morning.

VACANCIES.

BIRMINGHAM MATERNITY HOSPITAL.—House-Surgeon (Lady). Salary at the rate of £50 per annum.

BRISTOL ROYAL INFIRMARY.—(1) Honorary Dental Anaesthetist. (2) Honorary Assistant Dental Surgeon.

BRISTOL UNIVERSITY.—(1) Demonstrator of Anatomy. (2) Demonstrator of Physiology. Salary, £180 per annum, rising to £200 each.

CALCUTTA: LADY DUFFERIN VICTORIA HOSPITAL.—Senior House-Surgeon. Salary, Rs 250 per mensem.

CANTERBURY: KENT AND CANTERBURY HOSPITAL.—House-Physician. Salary, £70 per annum.

CHESTERFIELD AND NORTH DERBYSHIRE HOSPITAL.—Junior House Surgeon. Salary, £60 per annum.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST. Victoria Park, E.—House-Physician (male). Salary at the rate of £75 per annum.

EDINBURGH: ROYAL EDINBURGH HOSPITAL FOR SICK CHILDREN.—Four Resident Medical Officers.

ENNISKILLEN: FERMANAGH COUNTY HOSPITAL.—House-Surgeon. Salary, £72 per annum.

GLAMORGAN COUNTY COUNCIL.—Medical Inspector of Children in Public Elementary Schools. Salary, £300 per annum.

GREAT YARMOUTH HOSPITAL.—House-Surgeon. Salary, £100 per annum.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—House-Physician. Salary, £30 for six months and £2 10s. washing allowance.

ITALIAN HOSPITAL, Queen Square, W.C.—Honorary Assistant Physician (Out-patients).

LEEDS TUBERCULOSIS ASSOCIATION.—Resident Medical Officer for the Sanatorium at Gateforth. Salary at the rate of £100 per annum.

KING WILLIAMSTOWN, CAPE OF GOOD HOPE: Grey Hospital.—Resident House-Surgeon. Salary at the rate of £250 per annum.

KING'S COLLEGE HOSPITAL.—Junior House-Anaesthetist. Salary at the rate of £50 per annum.

LAMBETH PARISH.—District Medical Officer and Medical Officer for the Home for the Aged Poor. Salary for each appointment £150 per annum.

LIVERPOOL UNIVERSITY: CANCER RESEARCH LABORATORY.—Research Worker. Salary commencing £150 per annum.

LONDON TEMPERANCE HOSPITAL.—Assistant House-Surgeon. Honorarium at the rate of 100 guineas per annum.

LONDON THROAT HOSPITAL, Great Portland Street, W.—House-Surgeon. Honorarium, £50 a year.

MANCHESTER NORTHERN HOSPITAL FOR WOMEN AND CHILDREN.—(1) Honorary Assistant Physician for Diseases of Children; (2) Assistant Medical Officer.

METROPOLITAN EAR, NOSE AND THROAT HOSPITAL, Graft Street, W.—Anaesthetists.

OXFORD: RADCLIFFE INFIRMARY AND COUNTY HOSPITAL.—(1) House-Surgeon; (2) Junior House-Surgeon. Salary at the rate of £80 per annum each.

ROYAL NATIONAL ORTHOPAEDIC HOSPITAL, Great Portland Street, W.—Surgical Registrar. Honorarium, £105.

ST. JOHN'S HOSPITAL FOR DISEASES OF THE SKIN, Leicester Square, W.C.—Pathologist. Salary, £200 per annum.

ST. PETER'S HOSPITAL FOR STONE, Etc., Henrietta Street, W.C.—Junior House-Surgeon. Salary at the rate of £50 per annum.

SALISBURY INFIRMARY.—Assistant House-Surgeon. Salary, £50 per annum.

SOUTHPORT INFIRMARY.—Junior House and Visiting Surgeon (Male). Salary at the rate of £70 per annum.

SUNDERLAND INFIRMARY.—Two Male House-Surgeons. Salary, £80 per annum each.

UNIVERSITY COLLEGE HOSPITAL, Gower Street, W.C.—Medical Officer in Charge of Electro-Radiographic Department.

WOLVERHAMPTON AND MIDLAND COUNTIES EYE INFIRMARY.—House-Surgeon. Salary, £80 per annum.

CERTIFYING FACTORY SURGEONS.—The Chief Inspector of Factories announces vacancies at Maiden Newton, co. Dorset; Leuchars, co. Fife; and Lytham, co. Lancaster.

APPOINTMENTS.

AUBREY, T., M.B.Lond., Medical Officer of Health, Warmley Rural District.

CARTER, Humphrey G., M.B., Ch.B., Resident House-Surgeon to the Surgical Out-patient Department of the Edinburgh Royal Infirmary.

CHEESE, F. W., M.D.Durh., Certifying Factory Surgeon for the Harpenden District, co. Hertford.

COURT, Arthur, M.B., B.C.Camb., Medical Officer and Public Vaccinator for the Staveley District of the Chesterfield Union.

COURTNEY, H. G. S., M.R.C.S., L.R.C.P., District Medical Officer of the Luton Union.

CRAIG, J., M.B., Ch.B.Glasg., Medical Officer of Health, Church Urban District.

CURTIS, Henry, B.S., F.R.C.S., Assistant Surgeon to the Dreadnought Hospital, Greenwich, and Joint Teacher of Operative Surgery at the London School of Clinical Medicine.

DRAPES, T. L., M.R.C.S., L.R.C.P., Medical Officer of Health, Chepstow Urban and Port Districts.

EADIE, A. W., M.B., B.S.Glas., Resident Assistant Medical Officer, Burnley Union Workhouse.

ERSKINE, A. M., M.D., R.U.I., Certifying Factory Surgeon for the Goole District, co. York.

FARBSTEIN, J. H., M.B., B.S.Lond., Resident Medical Officer of the Workhouse of the Kingston-upon-Hull Incorporation.

FRASER, G. M., M.B., Assistant Medical Officer to the Workhouse and Cottage Homes of the Aston Union.

FREER, R., M.D.Camb., Medical Officer of Health, Rugeley Urban District.

GIBB, W. S., M.B., C.M.Edin., District Medical Officer of the Hartlepool Union.

GILDER, M. D. D., F.R.C.S., House-Surgeon to University College Hospital.

MARSDEN, E. Maude, M.B., Ch.B.Vict., House-Surgeon to St. Mary's Hospitals, Manchester.

MARTIN, P. S., M.R.C.S., L.R.C.P., House-Surgeon to University College Hospital.

MILES, Alexander, M.D., F.R.C.S.Edin., Surgeon to the Royal Infirmary, Edinburgh.

MORISON, J. Rutherford, M.B., F.R.C.S.Edin., Professor of Surgery in the University of Durham College of Medicine, Newcastle-on-on-Tyne.

PEARCE, George Harper, D.P.H.(Camb.), Medical Officer of Health and Medical Officer to the Education Committee of the Borough of Batley.

STEADMAN, F. S. J., M.R.C.S., L.R.C.P., L.D.S., Honorary Dental Surgeon to the Metropolitan Hospital.

WATSON, A. Pirie, M.A., M.B., Ch.B., Clinical Assistant to the Surgical Out-patient Department of the Edinburgh Royal Infirmary.

WATSON, C. Gordon, F.R.C.S., Assistant Surgeon to St. Bartholomew's Hospital.

WEBBER, L. M., M.R.C.S., L.R.C.P., Second Resident Assistant Medical Officer of the Lewisham Union Infirmary.

GUY'S HOSPITAL, S.E.—The following have been appointed Dental House-Surgeons: F. Bocquet Bull, C. H. Bradnam, R. W. Powell.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in post-office orders or stamps with the notice not later than Wednesday morning, in order to ensure insertion in the current issue.

BIRTHS.

BIRKS.—On January 16th, at Petersburg, South Australia, the wife Melville Birks, M.B., F.R.C.S.Eng., of a son.

TRIST.—January 22nd, at Crest House, Putney Bridge Road, S.W., the wife of John Ronald Rigden Trist, of a daughter.

WILSON.—On January 7th, at Paddock, Huddersfield, the wife of David Wilson, Junr., M.B., M.R.C.S., of a daughter.

DEATH.

WEIR.—On the 18th inst., in London, suddenly during an operation, Archibald Weir, L.R.C.P. and S.Edin., lately of St. Giles, Malvern Link.

DIARY FOR THE WEEK.

TUESDAY.

ROYAL SOCIETY OF MEDICINE:

PATHOLOGICAL SECTION, National Hospital, Queen Square, W.C., 8.30 p.m.—Dr. F. W. Mott, F.R.S., and Dr. Edgar Silvester: Changes in the Nerve Cells of a Man who Died Seven Hours after receiving a Current of 10,000 Volts. Dr. F. W. Mott, F.R.S.: Two Specimens from Professor Marinesco illustrating Regeneration of Nerves. Dr. A. J. Ball: Two Cases of Cyst of Choroid Plexus. Dr. Batten and Dr. Gordon Holmes: A Recent Case of Acute Poliomyelitis. Dr. Hinds Howell: Two Cases of Tumour of the Pineal Gland. And other communications.

THERAPEUTICAL AND PHARMACOLOGICAL SECTION, 20, Hanover Square, W., 4.30 p.m.—Paper: Dr. Bashford, The Immunity Reaction of Cancer. Professor W. E. Dixon will open a discussion on Proprietary, Patent, and Secret Remedies.

THURSDAY.

NORTH-EAST LONDON CLINICAL SOCIETY, Prince of Wales's Hospital, Tottenham, 4.15 p.m.—Clinical Cases. Election of Members.

FRIDAY.

ROYAL SOCIETY OF MEDICINE:

LARYNGOLOGICAL SECTION, 20, Hanover Square, 5 p.m.—Cases and Specimens.

SECTION OF ANAESTHETICS, 20, Hanover Square, 8 30 p.m.—Adjourned discussion on Mr. Bellamy Gardner's paper on Lymphatism will be opened by Dr. Farquhar Buzzard.

SATURDAY.

ROYAL SOCIETY OF MEDICINE:

OTOLOGICAL SECTION, 20, Hanover Square, 10 a.m.—Cases and Specimens.

POST-GRADUATE COURSES AND LECTURES.

CENTRAL LONDON THROAT AND EAR HOSPITAL, Gray's Inn Road, W.C.—Tuesday, 3 45 p m., Nose; Thursday, 4 30 p m., Syphilis of the Throat; Friday, 3.45 p.m., Labyrinth.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C., Thursday, 4 p.m.—Spinal Caries.

LONDON SCHOOL OF CLINICAL MEDICINE, Seamen's Hospital, Greenwich. Daily arrangements: Out-patient Demonstration, 10 a.m.; Medical and Surgical Clinics, 2.15 p m. and 3.15 p.m. respectively: Operations, 2 p.m. Special Clinics: Ear and Throat at noon and 4 p.m., Monday, and noon, Thursday; Skin, at noon and 4 p m, Thursday, and noon, Friday; Eye, 11 a m, Wednesday and Saturday; Radiography, 4 p m, Thursday. Special Lectures: Wednesday, 3 30 p.m, The Normal Fundus Oculi and its Common Anomalies; Thursday, 2 30 p.m, Meningitis and its Treatment; Friday, 3.15 p m., Operative and Post-operative Accidents and Complications.

MEDICAL GRADUATES' COLLEGE AND POLYCLINIC, 22, Chenies Street, W.C.—The following clinical demonstrations have been arranged for next week, at 4 p.m. each day: Monday, Skin. Tuesday, Medical. Wednesday, Surgical. Thursday, Surgical. Friday, Ear, Nose, and Throat. Lectures, at 5 15 p m. each day, will be given as follows: Monday, Treatment of the Surgical Forms of Tuberculosis by Koch's Human Tuberculin. Tuesday, Affections of the Eye caused by Inflammation of the Accessory Sinuses of the Nose. Wednesday, The Treatment of Mastoiditis. Thursday, Some Painful Surgical Conditions of the Feet.

NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen Square, W.C.—Tuesday, 3.30 p.m., Researches in Otology; Friday, 3.30 p.m., Surgery of Paralytic Deformities.

NORTH-EAST LONDON POST-GRADUATE COLLEGE, Prince of Wales's General Hospital, Tottenham, N.—Monday, 10 a.m., Surgical Out-patient Clinic; 2 30 p.m., Medical Out-patient Clinic: Nose, Throat, and Ear Diseases; 4 30 p.m., Medical In-patient Clinic. Tuesday, 10 a.m, Medical Out-patient Clinic; 2 30 p.m. Operations; Surgical Clinic; Gynaecological Clinic; 4.30 p m, Lecture: Intussusception. Wednesday, 2.30 p.m., Medical Out-patient Clinic; Diseases of the Skin; Diseases of the Eye; X Rays. Thursday, 2 20 p.m., Gynaecological Operations; Medical Out-patient Clinic; Surgical Out-patient Clinic; 3 p.m, Medical In-patient Clinic. Friday, 10 a m., Clinic: Surgical Out patient; 2 30 p.m, Operations; Clinics; Medical Out patient; Eye; 3.30 p m, Medical In-patient.

POST-GRADUATE COLLEGE, West London Hospital, Hammersmith Road, W. The following are the arrangements for next week: Daily, 2 p.m. Medical and Surgical Clinics; X Rays; 2.30 p.m., Operations. Monday and Thursday and Wednesday, 2 p m, and Saturday, 10 a m., Diseases of the Eyes. Tuesday and Friday, 10 a.m., Gynaecological Operations; 2 p.m. (and Wednesday and Saturday, 10 a m.), Diseases of Throat, Nose, and Ear; 2.30 p.m., Diseases of the Skin. Wednesday and Saturday, 10 a.m., Diseases of Children. Wednesday, 2.30 p.m., Diseases of Women. Lectures: At 10 a.m, Monday and Thursday, Demonstration by Surgical Registrar; Friday, Demonstration by Medical Registrar. At 12 noon, Thursday, Pathological Demonstration. At 12.15 p m., Tuesday and Wednesday, Practical Medicine. At 5 p.m., Monday, Practical Surgery; Tuesday, Gynaecology; Wednesday, Medicine; Thursday, The Significance of Ocular Paralysis in the Diagnosis of Nervous Disease; Friday, Sleeping Sickness.

PUBLISHERS' ANNOUNCEMENTS.

WE are informed that the St. Catherine Press, Limited, York Buildings, Adelphi, W.C., is about to publish a new volume by Dr. T. N. Kelynack, editor of the *British Journal of Tuberculosis*. It will be very fully illustrated and provided with maps. Full particulars will be given of the health and sports stations in Norway and Sweden suited to the requirements of English health and holiday seekers. The volume is to be published at 1s. net.

We are informed that Messrs. J. and A. Churchill are about to publish *The Malaria Fevers, Haemoglobinuric Fever, and the Blood Protozoa of Man*, by Charles F. Craig, M.D., Captain, Medical Corps, U.S. Army. The book will be profusely illustrated by four coloured plates, twenty-five clinical charts, and twenty-eight photomicrographs and drawings.

CALENDAR OF THE ASSOCIATION.

Date.	Meetings to be Held.
FEBRUARY.	
1 TUESDAY ..	
2 WEDNESDAY	BURMA BRANCH, New General Hospital, Rangoon, 9.30 p.m.
3 THURSDAY ..	BURMA BRANCH, Medical Section, New General Hospital, Rangoon, 5 p.m. KENSINGTON DIVISION, *Metropolitan Counties Branch*, St. Mary's Hospital, 4.30 p.m.
4 FRIDAY ..	BURMA BRANCH, Annual Dinner, 8.15 p.m.
5 SATURDAY ..	BURMA BRANCH, Surgical Section, New General Hospital, Rangoon, 5 p.m. to 8 p.m.
6 Sunday ..	
7 MONDAY ..	LONDON: Standing Ethical Subcommittee, 2 p.m.
8 TUESDAY ..	
9 WEDNESDAY	ALTRINCHAM DIVISION, *Lancashire and Cheshire Branch*, General Meeting, Brooklands Hotel, 4.30 p.m.
10 THURSDAY ..	BEDFORD AND HERTS DIVISION, *South Midland Branch*, General Meeting, Bedford County Hospital, Bedford, 3 p.m. BIRMINGHAM BRANCH, Medical Institute, Edmund Street, 3.30 p.m. SOUTH-WESTERN BRANCH, Intermediate Meeting, Exeter.
11 FRIDAY ..	
12 SATURDAY ..	
13 Sunday ..	
14 MONDAY ..	

Date.	Meetings to be Held.
FEBRUARY *(Continued).*	
15 TUESDAY ..	
16 WEDNESDAY	CARDIFF DIVISION, *South Wales and Monmouthshire Branch*, Cardiff. LANCASHIRE AND CHESHIRE BRANCH, Meeting of Branch Council, Manchester, 4.30 p.m.
17 THURSDAY ..	LONDON: Metropolitan Counties Branch Council, 4.30 p.m.
18 FRIDAY ..	
19 SATURDAY ..	
20 Sunday ..	
21 MONDAY ..	
22 TUESDAY ..	
23 WEDNESDAY	BATH AND BRISTOL BRANCH, Bath. RICHMOND DIVISION, *Metropolitan Counties Branch*, Royal Hospital, Richmond, 8 30 p m.
24 THURSDAY ..	
25 FRIDAY ..	BIRMINGHAM BRANCH, Pathological and Clinical Section, Medical Institute, Edmund Street, 8 p.m. CITY DIVISION, *Metropolitan Counties Branch*, conjointly with Aesculapian Society, Metropolitan Hospital, 4 p.m. EDINBURGH BRANCH, Winter Clinical Meeting, Royal Infirmary; Museum, 11 a.m. onwards; Special Clinics during forenoon; Clinical Meeting, 4 p.m.; Dinner, Royal British Hotel, Princes Street, 6.30 p.m. HAMPSTEAD DIVISION, *Metropolitan Counties Branch*, 8.30 p.m.

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